

DATA SHEET SUPPLEMENT (statement of persons applying for single European pet passport)

The microchip identification number of the pe (it is advised to stick one of the stickers of the			
The number of the issued pet passport:		Date of issue: (YY/MM/DD):	
		nbered microchip identification and provided with nmand the pet) hereby make the below statement:	
The veterinarian issuing the above number information and legal provisions on twww.mgszh.gov.hu, www.petpassport.hu).	ered single Europear he commercial and	pet passport informed me about the accessit non-commercial transportation of pets (w	bility of the ww.fvm.hu,
	wner to transport the	net passport issued according to the legal provise pet. The transportation of the pet is only permitted	
	a vaccination. The re	n, the anti-hydrophobia (rabies) vaccination is effe peated vaccinations are considered effective ins eriod.	
host member state permits the inbound tran vaccination. I hereby take cognizance of the information as he may not be able to provide on my journey with a pet younger than three	sportation of animals a fact that the veterina e updated information a months not having a	on this may only be transported within the European younger than three months without anti-hydropho rian issuing the passport is not obliged to inform in default of a Central European Register. I may nti-hydrophobia (rabies) vaccination at my own rist deffective in the destination and transit countries.	bbia (rabies) me of such only depart sk and I am
With consideration of the above, I hereby ma	ke a statement that I		
intend		do not intend	
to transport a pet younger than three months (please unambiguously mark by underlining/e		bia (rabies) vaccination within the European Union statement)	n.
I hereby make a statement that I intend to se the above specified single European pet pas		the above specified microchip identification and pr	rovided with
	yes	no	
I transfer the ownership rights of the pet mark specified single European pet passport durin		ecified microchip identification and provided with the number state of the European Union:	ne above
	yes	no	
(please unambiguously mark by underlining/e	encircling the suitable	statement)	
		" at both sub-points under point 5. and sell or trans the veterinarian issuing the passport may not be h	
If I marked the answer "yes" at any of the sub		, I am obliged to comply with the regulations on tra For this purpose, I am obliged to contact the Vete	
Date (YY/MM/DD):			
name, address and signature of the person re	eceiving the single Eu	ropean pet passport:	